

THE ORIGIN OF NERVOUS SYMPTOMS IN ANATOMICAL ALTERATIONS OF THE SEXUAL ORGANS.

Dr. Engelhardt has availed himself of the abundant material that the Freiburg University provides in its gynæcological clinic, to prove that pathological alterations in the female sexual organs as primary cause of manifold nervous disturbances, has frequently been greatly exaggerated. He arranges his cases into four groups. 1. Those cases in which no nervous symptoms appear, not even dysmenorrhœa, notwithstanding important pathological conditions in or of, the sexual organs. To this class especially belong a considerable number of large tumors. 2. Those cases, by no means rare, in which the sexual organs are perfectly healthy and normal, but in which marked signs of affections of the lumbar portion of the cord with or without other concomitant nervous symptoms are manifest. Such patients, without exception, have never conceived. In forty per cent. the nervous symptoms are ascribed to hereditary predisposition of the gravest kind. In eighty per cent. the symptoms began in the earliest infancy, sometimes originating in nerves arising in the lumbar portion of the cord or in other nerves. In many of these cases dysmenorrhœa not due to local disease can be traced to various extraneous nervous influences, as early and severe physical labor, combined with inadequate nourishment, mental strain, etc.

3. This class comprises cases in which besides symptoms of affections of the lumbar cord, pathological alterations of minor degree were present, such as cervical catarrh, relaxation of entire ligaments, slight displacements, ante-flexion with posterior perimetritis, retroversion, etc. In all these cases the local alterations were not the cause, and could only have aggravated the nervous disorders, for the patients had always been delicate women, the majority scrofulous from infancy.

4. To this class belong those patients in whom symptoms of lumbar cord affections were coexistent with serious local disease of the internal sexual organs. But in these

also, though not quite so definitely as in the former group, irritability and debility of the nervous system could be traced to early infancy.

These numerous investigations and direct observations established a certainty of congenital predisposition to nervous troubles. At the first commencement of menstruation, dysmenorrhœa occurred, and chlorosis was only exceptionally absent. The most frequent complications were relaxation of the uterine ligaments, softness and flabbiness of the uterus, catarrh of the several apparatus, in consequence of defective nutrition. In some cases psychical influences, in others masturbation, imperfect coitus, etc., have been assigned as a cause. Occasionally local affections of the sexual system are the direct cause of nervous troubles, as well as other injurious influences, such as depraved nutrition, loss of blood, etc. Diseases of the sexual organs that last for years may and do lead to grave general nervous disturbances.—*London Medical Record*, Nov. 15, 1887.

L. F. B.

PHYSIOLOGY OF THE NERVOUS SYSTEM.

ON THE CONCEPTION OF HYSTERIA. (Weber den Begriff der Hysterie.) By P. J. Möbius (*Centralblatt für Nervenheilkunde*, etc., February 1, 1888).

Dr. Möbius, in calling attention to the various conceptions of this affection by medical men, takes exception to the name as misleading, and asserts that physicians are beginning to form a more unanimous idea of the character of this affection.

The first step towards this is in the recognition of the fact that this disease is a psychosis, or rather that the essential, the primary change is a morbid condition of the *psychic*. But inasmuch as some cases occur (especially in males) in which no demonstrable disturbance of the psychical functions is present, the essential characteristic may be found in the somatic symptoms. He says: "All those changes of the body are hysterical which are pro-